

10603546

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
						Sm./Lg.	
Basic Filing Fee	<u>201/101</u>						<u>750.00</u>
Total Claims >20	<u>203/103</u>		-20 =		X		
Independent Claims >3	<u>202/102</u>		-3 =		X		<u>36.00</u>
Mult. Dep Claim Present	<u>204/104</u>						
Surcharge	<u>205/105</u>						<u>786.00</u>
English Translation	<u>139</u>						

TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 786.00

Less Filing Fees Submitted - \$ 768.00

BALANCE DUE = \$ 18.00

Office of Initial Patent Examination